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Date of Deposit: April 12, 2004

Attorney Docket No.: 24299-514 CIP2A DIV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

FIRST-NAMED INVENTOR: Crossman, et al

FOR: DIAGNOSTICS AND THERAPEUTICS FOR RESTENOSIS

Box PATENT APPLICATION

Commissioner for Patents

P. O. Box 1450

Alexandria, VA 22313-1450

REQUEST FOR FILING A CONTINUING PATENT APPLICATION UNDER 37 CFR. §1.53(b)

1. This is a request for filing a divisional application under 37 C.F.R. §1.53(b). This application claims priority to USSN 09/578,534 filed May 24, 2000, which is a continuation-in-part of USSN 09/431,352 filed November 1, 1999 (now U.S. Pat. No. 6,524,795), which is a continuation-in-part of USSN 09/320,395, filed May 26, 1999 (now abandoned), which is a continuation-in-part of USSN 08/813,456, filed March 10, 1997 (now U.S. Pat. No. 6,210,877, the entire contents of which are incorporated herein by reference.

2. This application is a total of 129 pages. This application includes:

109 pages of specification (including claims and abstract)

10 pages of claims

1 page of abstract

20 sheets of drawings (FIGS. 1-10)

3. A Preliminary Amendment is being filed with this application. (6 pgs).

4. A copy of a signed combined Declaration/Power of Attorney submitted in continuation application USSN 09/578,538 filed May 24, 2000 is included.

5. The prior application is assigned of record to Interleukin Genetics, Inc.

6. An Information Disclosure Statement (filed September 6, 2001) and a Supplemental Information Disclosure Statement (filed December 7, 2001) and the accompanying modified PTO-1449 Forms are enclosed.

7. Fees associated with this application are calculated using the claims that will be pending in the application.



14230 U.S.PTO

22390 U.S.PTO
10/823197




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Request for Divisional Application (37 C.F.R. §1.53(b))

CLAIMS AS FILED					
Claims	Number Filed	Basic Fee Allowance	Number Extra	Rate	Basic Fee 37 CFR. 1.16(a) \$770.00
Total Claims (37 CFR. 1.16(c))	79	- 20 =	59	\$18.00	\$1,062.00
Independent Claims (37 CFR. 1.16(b))	7	- 3 =	4	\$86.00	\$344.00
Multiple Dependent Claim(s), if any (37 CFR. 1.16(d))	-0-			\$290.00	
				SUBTOTAL:	\$2,176.00
				Reduction by 50% for small entity:	\$.00
				TOTAL FEE:	\$2,176.00

9. A check (#18467) in the amount of **\$2,176.00** is enclosed. The Commissioner is authorized to charge any additional fees due, or credit overpayments, to Deposit Account No. 50-0311, Ref. No. 24299-514 CIP2A DIV.

10. A return postcard is enclosed.

Respectfully submitted,



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Dated: April 12, 2004

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